

# FEC FORM 3X

## REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Freedom Fund

ADDRESS (number and street)

1201 Pennsylvania Avenue

Suite 800



Check if different than previously reported. (ACC)

Washington

DC

20004

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00390674

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15 Quarterly Report (Q1)☐ July 15 Quarterly Report (Q2)☐ October 15 Quarterly Report (Q3)☐ January 31 Year-End Report (YE)☐ July 31 Mid-Year Report (Non-election Year Only) (MY)☐ Termination Report (TER)

(b) Monthly Report Due On:

☐ Feb 20 (M2)☐ May 20 (M5)☒ Aug 20 (M8)☐ Nov 20 (M11) (Non-Election Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12) (Non-Election Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Kolbet, Lance, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Kolbet, Lance, , ,

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office  
Use  
OnlyFEC FORM 3X  
Rev. 05/2016

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Freedom Fund

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
07 / 01 / 2020 To: M M / D D / Y Y Y Y Y Y  
07 / 31 / 2020

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">2020</span>		<span style="border: 1px solid black; padding: 2px;">795294.89</span>
(b) Cash on Hand at Beginning of Reporting Period.....	<span style="border: 1px solid black; padding: 2px;">726553.29</span>	
(c) Total Receipts (from Line 19) .....	<span style="border: 1px solid black; padding: 2px;">39965.72</span>	<span style="border: 1px solid black; padding: 2px;">132702.06</span>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<span style="border: 1px solid black; padding: 2px;">766519.01</span>	<span style="border: 1px solid black; padding: 2px;">927996.95</span>
7. Total Disbursements (from Line 31).....	<span style="border: 1px solid black; padding: 2px;">13361.27</span>	<span style="border: 1px solid black; padding: 2px;">174839.21</span>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<span style="border: 1px solid black; padding: 2px;">753157.74</span>	<span style="border: 1px solid black; padding: 2px;">753157.74</span>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.0</span>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.0</span>	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

Freedom Fund

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y
07	/	01	/	2020

To:

M M	/	D D	/	Y Y Y Y
07	/	31	/	2020

**I. Receipts**
**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

0.0

2000.0

(ii) Unitemized .....

0.0

0.0

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

0.0

2000.0

(b) Political Party Committees .....

0.0

0.0

(c) Other Political Committees

(such as PACs).....

39500.0

129000.0

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) .....

39500.0

131000.0

## 12. Transfers From Affiliated/Other

Party Committees.....

0.0

0.0

## 13. All Loans Received .....

0.0

0.0

## 14. Loan Repayments Received.....

0.0

0.0

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

434.19

434.19

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.0

0.0

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

31.53

1267.87

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3) .....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),  
12, 13, 14, 15, 16, 17, and 18(c)) .....

39965.72

132702.06

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) .....

39965.72

132702.06

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	7861.27	96839.21
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	7861.27	96839.21
22. Transfers to Affiliated/Other Party Committees.....	0.0	0.0
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5000.0	72500.0
24. Independent Expenditures (use Schedule E) .....	0.0	0.0
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.0	0.0
26. Loan Repayments Made.....	0.0	0.0
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.0	0.0
(b) Political Party Committees .....	0.0	0.0
(c) Other Political Committees (such as PACs).....	0.0	5000.0
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.0	5000.0
29. Other Disbursements (Including Non-Federal Donations).....	500.0	500.0
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	13361.27	174839.21
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	13361.27	174839.21

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	39500.0	131000.0
34. Total Contribution Refunds (from Line 28(d)) .....	0.0	5000.0
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	39500.0	126000.0
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	7861.27	96839.21
37. Offsets to Operating Expenditures (from Line 15, page 3).....	434.19	434.19
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	7861.27	96839.21

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 6 OF 18

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Freedom Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. AFLAC Inc. PAC**

Mailing Address 1932 Wynnton Road

City  
Columbus

State  
GA

Zip Code  
31999

FEC ID number of contributing  
federal political committee.

**C**

C00034157

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.0

Date of Receipt

**MM / DD / YYYY**  
07 / 31 / 2020

**Transaction ID : 1597071623917**

Amount of Each Receipt this Period

2500.0

☐ Memo Item  
Check

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. Bank Policy Institute - PAC**

Mailing Address 600 13th St, NW Suite 400

City  
Washington

State  
DC

Zip Code  
20005

FEC ID number of contributing  
federal political committee.

**C**

C00193177

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.0

Date of Receipt

**MM / DD / YYYY**  
07 / 31 / 2020

**Transaction ID : 1597072292259**

Amount of Each Receipt this Period

5000.0

☐ Memo Item  
Check

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. California Dairies Federal PAC**

Mailing Address 475 S. Tegner Rd.

City  
Turlock

State  
CA

Zip Code  
95380

FEC ID number of contributing  
federal political committee.

**C**

C00349746

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.0

Date of Receipt

**MM / DD / YYYY**  
07 / 31 / 2020

**Transaction ID : 1597070265684**

Amount of Each Receipt this Period

5000.0

☐ Memo Item  
Check

**SUBTOTAL** of Receipts This Page (optional)..... ►

12500.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 7 OF 18

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Freedom Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. Capital One Financial Corp. Assoc. Political Fund**

Mailing Address 1680 Capital One Drive

Attn: 19050-1204

City

McLean

State

VA

Zip Code

22102

FEC ID number of contributing  
federal political committee.

C

C00326595

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

5000.0

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 31 / 2020

**Transaction ID : 1597071527161**

Amount of Each Receipt this Period

5000.0

☐ Memo Item  
Check

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. Merck Employees PAC**

Mailing Address 601 Pennsylvania Avenue NW

City

Washington

State

DC

Zip Code

20004

FEC ID number of contributing  
federal political committee.

C

C00097485

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

5000.0

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 31 / 2020

**Transaction ID : 1597072366032**

Amount of Each Receipt this Period

3500.0

☐ Memo Item  
Check

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. National Air Traffic Controllers Association PAC**

Mailing Address 1325 Massachusetts Avenue NW

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

C

C00238725

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary  
☐ Other (specify)

☐ General

Aggregate Year-to-Date ▼

1000.0

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 24 / 2020

**Transaction ID : 1596549277340**

Amount of Each Receipt this Period

1000.0

☐ Memo Item  
Check

**SUBTOTAL** of Receipts This Page (optional)..... ►

9500.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 8 OF 18

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Freedom Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. National Beer Wholesalers Association PAC**

Mailing Address 1101 King Street, Suite 600

City  
Alexandria

State  
VA

Zip Code  
22314-2944

FEC ID number of contributing  
federal political committee.

**C** C00144766

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.0

Date of Receipt

**07 / 31 / 2020**

**Transaction ID : 1597071779546**

Amount of Each Receipt this Period

5000.0

☐ Memo Item  
Check

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. The Boeing Company PAC**

Mailing Address 929 Long Bridge Drive

City  
Arlington

State  
VA

Zip Code  
22202-4208

FEC ID number of contributing  
federal political committee.

**C** C00142711

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.0

Date of Receipt

**07 / 31 / 2020**

**Transaction ID : 1597072420884**

Amount of Each Receipt this Period

5000.0

☐ Memo Item  
Check

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. US Bancorp Political Participation Program Federal PAC**

Mailing Address 800 Nicollet Mall

City  
Minneapolis

State  
MN

Zip Code  
55402

FEC ID number of contributing  
federal political committee.

**C** C00018036

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2500.0

Date of Receipt

**07 / 31 / 2020**

**Transaction ID : 1597071581601**

Amount of Each Receipt this Period

2500.0

☐ Memo Item  
Check

**SUBTOTAL** of Receipts This Page (optional)..... ►

12500.00

**TOTAL** This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 18  
(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Freedom Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. UnitedHealth Group Inc. PAC**

Mailing Address 701 Pennsylvania Avenue, NW Suite

City  
Washington

State  
DC

Zip Code  
20004

FEC ID number of contributing  
federal political committee.

**C** C00274431

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.0

Date of Receipt

**07** / **31** / **2020**

**Transaction ID : 1597071690347**

Amount of Each Receipt this Period

5000.0

☐ Memo Item  
☐ Check

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

5000.00

39500.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 18

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Freedom Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Mike Crapo for U.S. Senate**

Mailing Address P.O. Box 1948

City  
BoiseState  
IDZip Code  
83701FEC ID number of contributing  
federal political committee.

C

C00330886

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For: 010

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

434.19

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
07		24		2020

Transaction ID : 1596549501396

Amount of Each Receipt this Period

434.19

☐ Memo Item

Check

Refund for COVID Supplies

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary☐ General☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

434.19

TOTAL This Period (last page this line number only)..... ▶

434.19

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 18

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Freedom Fund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Chain Bridge Bank**

Mailing Address 1445-A Laughlin Avenue

City  
McLeanState  
VAZip Code  
22101FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1267.87

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
07	/	31	/	2020

Transaction ID : 1596549124479

Amount of Each Receipt this Period

31.53

☐ Memo Item  
Interest

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
	/		/	

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
	/		/	

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

31.53

31.53

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 12 OF 18

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Freedom Fund

Full Name (Last, First, Middle Initial)

**A. First Bankcard**

Mailing Address P.O. Box 2818

City  
OmahaState  
NEZip Code  
68103Purpose of Disbursement  
PAC Credit Card payment - see below

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	7			2	0	2	0		

FEC Identification Number

C

Transaction ID : 15958557284

Amount of Each Disbursement this Period

3380.2

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Delta Airlines**

Mailing Address Hartsfield Jackson Atlanta Interna

City  
AtlantaState  
GAZip Code  
30320Purpose of Disbursement  
PAC Airline Tickets

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	7			2	0	2	0		

FEC Identification Number

C

Transaction ID : 159585584331

Amount of Each Disbursement this Period

3380.2

See BillPay#112 payable to First Bankcard \$3,380.20

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. First Bankcard**

Mailing Address P.O. Box 2818

City  
OmahaState  
NEZip Code  
68103Purpose of Disbursement  
PAC Credit Card payment - see below

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	7			2	0	2	0		

FEC Identification Number

C

Transaction ID : 15958560958

Amount of Each Disbursement this Period

84.45

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3464.65

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 13 OF 18

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Freedom Fund

Full Name (Last, First, Middle Initial)

**A. First Bankcard**

Mailing Address P.O. Box 2818

City  
OmahaState  
NEZip Code  
68103Purpose of Disbursement  
PAC Credit Card payment - see below

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	7			2	0	2	0		

FEC Identification Number

C

Transaction ID : 15958563272

Amount of Each Disbursement this Period

1310.12

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Amazon.Com Superstore**

Mailing Address PO Box 18226

City  
SeattleState  
WAZip Code  
98108Purpose of Disbursement  
PAC Office Supplies

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	7			2	0	2	0		

FEC Identification Number

C

Transaction ID : 15964705430

Amount of Each Disbursement this Period

42.29

See BillPay#117 payable to First Bankcard \$1,310.12

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Amazon.Com Superstore**

Mailing Address PO Box 18226

City  
SeattleState  
WAZip Code  
98108Purpose of Disbursement  
PAC Office Supplies

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	7			2	0	2	0		

FEC Identification Number

C

Transaction ID : 15964711455

Amount of Each Disbursement this Period

29.66

See BillPay#117 payable to First Bankcard \$1,310.12

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

1310.12

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 14 OF 18

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Freedom Fund

Full Name (Last, First, Middle Initial)

**A. Amazon.Com Superstore**

Mailing Address PO Box 18226

City  
SeattleState  
WAZip Code  
98108Purpose of Disbursement  
PAC Food & Beverage

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	7			2	0	2	0		

FEC Identification Number

C

Transaction ID : 15964706731

Amount of Each Disbursement this Period

64.5

☒ Memo Item See BillPay#117 payable to First Bankcard \$1,310.12

Full Name (Last, First, Middle Initial)

**B. Amazon.Com Superstore**

Mailing Address PO Box 18226

City  
SeattleState  
WAZip Code  
98108Purpose of Disbursement  
PAC Office Supplies

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	7			2	0	2	0		

FEC Identification Number

C

Transaction ID : 15964715371

Amount of Each Disbursement this Period

13.77

☒ Memo Item See BillPay#117 payable to First Bankcard \$1,310.12

Full Name (Last, First, Middle Initial)

**C. Amazon.Com Superstore**

Mailing Address PO Box 18226

City  
SeattleState  
WAZip Code  
98108Purpose of Disbursement  
PAC Books

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	7			2	0	2	0		

FEC Identification Number

C

Transaction ID : 15964708316

Amount of Each Disbursement this Period

19.11

☒ Memo Item See BillPay#117 payable to First Bankcard \$1,310.12

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.00

<b>X</b>	21b		22		23		26		27
	28a		28b		28c		29		30b

## Freedom Fund

### A. U.S. Senate Gift Shop

Date of Disbursement

MM / DD / YYYY

001

Category/  
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

FEC Identification Number

C						
---	--	--	--	--	--	--

Transaction ID : 15958584238

Amount of Each Disbursement this Period

900.0

	Memo Item	See BillPay#114 payable to First Bankcard \$1,310.12
---	-----------	--

### B. Internal Revenue Service

Date of Disbursement

MM / DD / YYYY

001

Category/  
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

FEC Identification Number

C							
---	--	--	--	--	--	--	--

Transaction ID : 159655068275

Amount of Each Disbursement this Period

1421.0

Memo Item

### C. PCI Payments

Date of Disbursement

001

Category/  
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

FEC Identification Number

C

Transaction ID : 15965497496

Amount of Each Disbursement this Period

115.5

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1536.50

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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 16 OF 18

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Freedom Fund

Full Name (Last, First, Middle Initial)

**A. Shirley Taylor**

Mailing Address 415 Rothbury Drive

City  
CaldwellState  
IDZip Code  
83605Purpose of Disbursement  
PAC Convention Supplies

001

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	7			2	0	2	0		

FEC Identification Number

C

Transaction ID : 15958610289

Amount of Each Disbursement this Period

1500.0

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1500.00

7811.27



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 17 OF 18

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Freedom Fund

Full Name (Last, First, Middle Initial)

**A. Burgess 4 Utah**

Mailing Address 370 East South Temple #580

City  
Salt Lake CityState  
UTZip Code  
84111Purpose of Disbursement  
PAC Political Contribution

011

Category/  
Type

Candidate Name

Owens, Burgess, , ,

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

State: UT District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		23		2020

FEC Identification Number

C C00725853

Transaction ID : 15955547105

Amount of Each Disbursement this Period

2500.0

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Lummis for Wyoming**

Mailing Address P.O. Box 52188

City  
CasperState  
WYZip Code  
82609Purpose of Disbursement  
PAC Political Contribution

011

Category/  
Type

Candidate Name

Lummis, Cynthia Marie, , ,

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2020

☒ Primary ☐ General  
☐ Other (specify)

State: WY District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		09		2020

FEC Identification Number

C C00443580

Transaction ID : 15943192557

Amount of Each Disbursement this Period

2500.0

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

5000.00

TOTAL This Period (last page this line number only).....▶

5000.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 18 OF 18

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Freedom Fund

Full Name (Last, First, Middle Initial)

**A. City of Caldwell**

Mailing Address P.O. Box 1179

City  
CaldwellState  
IDZip Code  
83606Purpose of Disbursement  
PAC Donation

001

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		07		2020

FEC Identification Number

C

Transaction ID : 15941518362

Amount of Each Disbursement this Period

500.0

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

500.00

500.00